

<b>Title of Meeting:</b>	<b>Governing Body</b>	<b>Agenda Item: 9.2</b>									
<b>Date of Meeting:</b>	<b>24 March 2022</b>	<table border="1"> <tr> <th colspan="2">Session (Tick)</th> </tr> <tr> <td><b>Public</b></td> <td>X</td> </tr> <tr> <td><b>Private</b></td> <td></td> </tr> <tr> <td><b>Workshop</b></td> <td></td> </tr> </table>		Session (Tick)		<b>Public</b>	X	<b>Private</b>		<b>Workshop</b>	
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<b>Workshop</b>											
<b>Paper Title:</b>	<b>Primary Care Commissioning Committee Key Messages</b>										
<b>Responsible Governing Body Member Lead</b> Sheenagh Powell, Lay Member for Financial Performance and PCCC Chair		<b>Report Author and Job Title</b> Sheenagh Powell, Lay Member for Financial Performance and PCCC Chair									
<b>Purpose (this paper is for)</b>	<table border="1"> <tr> <th>Decision</th> <th>Discussion</th> <th>Assurance</th> <th>Information</th> </tr> <tr> <td></td> <td></td> <td>X</td> <td></td> </tr> </table>			Decision	Discussion	Assurance	Information			X	
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		X									
<b>Has the report (or variation of it) been presented to another Committee / Meeting? If yes, state the Committee / Meeting:</b> No.											
<p><b>Executive Summary</b></p> <p>The Primary Care Commissioning Committee has been established to enable members to make decisions on the review, planning and procurement of primary care services across North Yorkshire, under delegated authority from NHS England. The delegated functions of the Committee are undertaken in the context of a desire to promote increased co-commissioning with NHS England to increase quality, efficiency, productivity and value for money and to remove administrative barriers. In addition, there is a focus on ensuring the longer-term development and sustainability of primary care services locally, considering issues such as workforce, training and changing models of care.</p> <p>Key Messages from the meeting held on 27 January 2022 are attached at Appendix A. The most recent Confirmed minutes, from the meeting held on 21 October 2021, are attached at Appendix B.</p>											
<p><b>Recommendations</b></p> <p>The Governing Body is asked to receive the report as assurance.</p>											
<p><b>Monitoring</b></p> <p>An assurance report on key topics discussed at the Primary Care Commissioning Committee will be brought to each Governing Body meeting.</p>											
<b>Any statutory / regulatory / legal / NHS Constitution implications</b>	The Primary Care Commissioning Committee is accountable to the Governing Body and is required to provide key messages and confirmed minutes from all of its meetings.										
<b>Management of Conflicts of Interest</b>	No conflicts of interest have been identified prior to the meeting.										
<b>Communication / Public &amp; Patient Engagement</b>	Key Messages are published with the Governing Body Papers and any additional update is noted in the minutes, which are also published on the CCG's website.										
<b>Financial / resource implications</b>	None identified.										
<b>Outcome of Impact Assessments completed</b>	Not applicable.										

**Sheenagh Powell, Lay Member for Financial Performance and PCCC Chair**

**Primary Care Commissioning Committee  
Key Messages**

The Primary Care Commissioning Committee met virtually on 27 January 2022.

Key Messages to the Governing Body

- The Committee received the significant risks report which highlighted two risks that had a score of 12 which are below the GB highlighted risk level. No change in risk or scoring was noted from the last meeting and the committee were assured they continue to be managed appropriately.
- The Committee approved the PCCC draft Annual Report and Annual Review of Effectiveness Report for 2021/22 and agreed any final amendments could be agreed by the responsible Executive Director, Director of Governance and Committee Chair.
- A detailed Primary Care Report was well received and discussed. This gave an update on the Covid recovery, the COVID vaccination programme and GP digital workstreams.
- A report was received from NHSE/I providing links to the latest Primary Contract and guidance updates.
- The Committee noted the approval of the transfer and novation Harewood Practice PMS contract to Heartbeat Alliance GP Federation.
- The Committee approved the rent increase of £2,220.83 to Moss and Partners for the Killinghall branch surgery as recommended by the DV.
- A report was received on Local Enhanced Service (LES) contracts which provided detail on the work to review and harmonise the LES schemes across the North Yorkshire (and York). It also confirmed that approval had been given by the Governing Body to continue the existing schemes into 2022/23 in the meantime.
- A Finance report to December 2021 was received detailing the forecast overspend of £497,000 on Primary Care Services, details of the winter access funding totalling £7.59m to increase appointments in Primary Care across the ICS area and an update on prescribing spend, which is currently overspending by £715,000. Overspends are expected to be offset by underspends in other CCG budgets. In addition, the Committee received a detail Primary Care Performance report which provided assurance of a generally improving position.

**Sheenagh Powell**  
**Governing Body Deputy Chair**  
**Lay Member for Financial Performance and PCCC Chair**

**NORTH YORKSHIRE CLINICAL COMMISSIONING GROUP  
(NYCCG)  
Primary Care Commissioning Committee (PCCC)**

**21 October 2021  
14:00 – 16:00**

**Via Microsoft Teams**

<b>Present (Voting Members)</b>	
Sheenagh Powell	Governing Body Lay Member, North Yorkshire CCG, Chair
Wendy Balmain	Director of Strategy and Integration, North Yorkshire CCG
Dr Peter Billingsley	North Yorkshire CCG Governing Body GP
Jane Hawkard (part)	Chief Finance Officer, North Yorkshire CCG
Dr Mark Hodgson	Clinical Lead for Community & Integration, and Governing Body GP, North Yorkshire CCG & Aldbrough St John Surgery
Kate Kennady	Governing Body Lay Member, North Yorkshire CCG
Sue Peckitt	Chief Nurse, North Yorkshire CCG
Dr Bruce Willoughby	North Yorkshire CCG Governing Body GP

<b>In Attendance (Non-Voting Members)</b>	
Andrew Dangerfield	Head of Primary Care Transformation, North Yorkshire CCG
Ashley Green	Chief Executive, Healthwatch
Angela Hall (part)	Health Improvement Manager, NYCC (deputising for Clare Beard, Public Health Consultant)
Helen Phillips	Interim Head of Primary Care (North Yorkshire and Humber), NHSE
Sharon Gent	Secretariat (minutes)
Cathy Tobin	Secretariat (attendance)

<b>In Attendance</b>	
Tim Readman	Senior Communications Officer, NYCCG
Sasha Sencier (part)	Board Secretary and Senior Governance Manager, NYCCG
Maria Dean	Senior Service Development Manager, Primary Care, North Yorkshire CCG

<b>Apologies</b>	
Dr Sally Tyrer	GP and LMC representative
Dr Omnia Hefni	NYCCG GP

**CONFIRMED**

## **1.0 Apologies for Absence and Quorum**

The Chair welcomed the Committee members and apologies were noted as above.

The Chair confirmed that the meeting was quorate, taking into account any apologies for absence.

### **The Primary Care Commissioning Committee:**

Noted attendance and apologies and confirmed the meeting was quorate under the requirements set out within the Terms of Reference.

## **2.0 Declarations of Members' Interests in relation to the Business of the Meeting**

The Chair reminded Committee members of their obligation to declare any interest they may have on any issues arising at Committee meetings which might conflict with the business of North Yorkshire Clinical Commissioning Group (NYCCG).

No declarations of interests were declared in relation to the business of the meeting.

Declarations declared by members of the Primary Care Commissioning Committee are listed on the CCG website: <https://www.northyorkshireccg.nhs.uk/home/about-us/publications/conflicts-of-interest/>

### **The Primary Care Commissioning Committee:**

Noted that no declarations of interests were declared in relation to the business of the meeting.

## **3.0 Questions from Members of the Public**

The Chair advised that no members of the public had requested to join the meeting and no questions had been submitted.

### **The Primary Care Commissioning Committee:**

Noted that no members of the public had requested to join the meeting and no questions had been submitted.

## **Minutes and Matters Arising**

### **4.1 Minutes from the Meeting held on Thursday 22 July 2021**

Minutes of the meeting held on Thursday 22 July 2021 were reviewed by the Primary Care Commissioning Committee for accuracy and the following was noted:

Angela Hall noted her job title should read 'Health Improvement Manager'. The minutes were agreed as a true record of the meeting with the above amendment.

### **The Primary Care Commissioning Committee:**

Noted that Angela Hall's job title should read 'Health Improvement Manager' and accepted the minutes as an accurate and true record of the meeting with the above amendment.

## **4.2 Action log**

The action log was reviewed by the Primary Care Commissioning Committee and the following was noted:

PCCC Forward Plan – agenda item closed.

LES Report – Jane Hawkard noted that the LES report was presented at Clinical Executive and Transformational and Financial Recovery Group. There were a number of options and it was recommended that there be no change at present. Jane advised she was going to look at the paper from a financial perspective but in the meantime, there would be no change to any LES's.

### **The Primary Care Commissioning Committee:**

Noted the above updates from the action log and the action log was updated accordingly.

## **7.0 Finance and Performance**

### **7.1 Finance Report**

Jane Hawkard presented the report noting the primary care commissioning funding allocation had a shortfall of circa £2.3m. The additional roles funding is expected to be underspent. Prescribing continues to look like it will overspend (with savings factored in). Significant work is still required with prescribing and the CCG are working on this together with Optum. £250m Winter Access Funding has been given nationally for increased access to primary care and further information will be available at the next meeting. There were no questions.

### **The Primary Care Commissioning Committee:**

Noted the finance report update.

Jane Hawkard left the meeting at 14:16.

## **6.0 Strategy and Planning**

### **6.3 Public Health Update**

Angela Hall presented the report. With regard to Covid, 3 districts including Harrogate are outliers. Support is continuing in schools where the majority of outbreaks are from. NYCC are continuing with the vaccination programme and also supporting the roll out of the 12-15 years vaccination programme.

North Yorkshire County Council will be extending existing contracts with GP practices and Pharmacies for the provision of a range of primary care based public health services, which are commissioned directly via an Approved Provider List. The extension period will be for a maximum of 3 years until 31st March 2025. Extension letters will be issued and a formal extension process is in place.

The council met with Live Well Smoke Free and Harrogate and Scarborough have the highest smoking prevalence across North Yorkshire with 14.4% and 13.6 respectively.

Angela noted the Warm and Well support available for those living in fuel poverty.

GP practices can also access very brief advice (VBA) training, for any practice staff, provided by Living Well Smokefree.

Peter Billingsley noted that the smoking prevalence percentage was better than it has ever been.

**Action: Andrew Dangerfield and Angela Hall to have a conversation regarding Living Well Smokefree.**

**Action: Andrew Dangerfield, Bruce Willoughby, Angela Hall and Natalie Smith to have a discussion regarding extension of the Public Health commissioned APL services from March 2022.**

#### **The Primary Care Commissioning Committee:**

Noted the Public Health Report update.

## **5.0 Governance**

### **5.1 Significant Risks**

Wendy Balmain presented the report in Sasha Sencier's absence and noted that two risks assessed at 12 and although only risks at 15 or above are presented at the committee, these risks were being presented for transparency. The two risks were 'failure to manage growth pressures placed on health care services across North Yorkshire' and increase in demand on primary care services in relation to Flu Vaccination Programme and COVID Vaccination and Booster Programme.

Wendy noted the system was very busy at present and more primary care appointments are being offered than in the same period pre pandemic. Demand continues to rise as more patients are now coming forward who may have delayed presenting to healthcare services. An escalation framework, 'OPEL' is in place and available for all practices to use. This means that practices can notify the CCG and other partners if they need additional support.

£250m Winter Access Fund is being made available nationally to support better access in primary care through winter. Discussions are underway with the Primary Care Collaborative and PCNs about what will help them to manage better access in the context of an already busy and anticipated challenging winter period.

Kate Kennady noted that there is a group of people out there willing to help promote access to primary care. Wendy noted that would be really helpful and suggested the

Communication teams could be involved. Angela Hall noted NYCC would also be happy to help. It was noted one of the main issues was with telephone calls and Andrew Dangerfield advised that if a practice reaches OPEL 3 a conversation with the practice would take place to explore what help is available. This could include diverting calls to other services for a short period. Where a divert took place this would be for a short amount of time in the day or the line would be left open and the receptionists would signpost callers to other services. Helen Phillips advised that NHSE are trying to divert patients away from calling the surgery for things that they don't need to.

Tim Readman noted 'Here and Now', a toolkit which communications are pulling together for practices. This will be available shortly for patients and practices. Communication teams are working on winter and are aware of pressures.

Andrew Dangerfield noted that the Flu and Covid Vaccination programmes for 1<sup>st</sup> and 2<sup>nd</sup> vaccines and the booster vaccine were going well. Patients should receive a text from the National Booking Service and can book either through the National Booking Service or their GP. This will progress through the Winter with oldest / most at risk being a priority. Staffing is being managed closely with additional capacity being given where it can.

**The Primary Care Commissioning Committee:**

Noted the above updates and were assured.

**5.2 Internal Audit Report on Primary Care Commissioning and Contracting:  
Commissioning and Procurement of Services**

Sheenagh Powell advised that the internal audit report was 'To Receive' not approve. Andrew Dangerfield advised that substantial assurance had been received with sound internal control and this Committee's Governance had been acknowledged. There were two recommendations; refresh of guidance and recirculation and sign off of the Extended Access contract variation to extend the term for the Harrogate and Rural District locality services.

Wendy Balmain recognised the hard work from the team reflected in the substantial assurance received, Dr Bruce Willoughby and Sheenagh Powell echoed the same. The refreshed guidance will be brought to the next Committee meeting to note before circulation.

**The Primary Care Commissioning Committee:**

Noted the Internal Audit Report updates.

**5.3 PCCC Forward Plan**

Sheenagh Powell presented the PCCC Forward Plan and asked for comments. There were no comments.

**The Primary Care Commissioning Committee:**

Noted the PCCC Forward Plan.

## **6.0 Strategy and Planning**

### **6.1 Primary Care Report**

Wendy Balmain presented the report and noted Amanda Bloor was working to establish a Primary Care Collaborative at Humber, Coast and Vale (HCV) with two supporting Collaboratives to ensure there was an equitable voice for Primary Care at Place and ICS level. Primary Care Commissioning will transfer to the ICS for medical from April 2022 and a due diligence process is underway.

Bruce Willoughby noted a high rate of Covid and other respiratory infections were having a big impact and noted the flexible staffing pool pilot which allows local practice staff to work flexibly across other practices.

It was noted the £250m Winter Access Fund letter was not well received nationally. Conversations are taking place locally and the fund does provide an opportunity to support general practice in the short term.

Sue Peckitt advised there was one largescale local vaccination site in York which was enough capacity across North Yorkshire at present. NHSE have commissioned vaccinations for 12-15 years and the CCG are supporting delivery. Discussion had taken place regarding using a community pharmacy for support. Helen Phillips advised a letter had gone out to PCNs and community pharmacies asking for capacity to vaccinate 12-15 years. Some responses had been received and NHSE are looking at how to use providers.

#### **The Primary Care Commissioning Committee:**

Noted the updates in the primary care report.

### **6.2 Report from NHS England / NHS Improvement**

Helen Phillips presented the report and noted the two new enhanced services made available to GP practices to support recovery from the pandemic. In North Yorkshire 50 out of 51 practices signed up to both enhanced services except for Ripon Spa surgery.

Helen noted the e-declaration which is an annual contractual requirement for GP practices, the deadline for submissions being Friday 26<sup>th</sup> November 2021.

The friends and Family Test returns had been extended to 31<sup>st</sup> December 2021.

#### **The Primary Care Commissioning Committee:**

Noted the report from NHS England / NHS Improvement and updates.

### **6.4 Practice Changes and Rent Reviews**

#### **Central Healthcare Lawrence House**

Andrew Dangerfield presented the report which followed a district valuers report backdated to November 2016. The rent increase for Lawrence House was a cost of £8,432 per annum which was an additional cost of £42,300 to the CCG. Andrew advised the CCG were obliged to pay and the cost had been accrued for in the budget. The Committee were happy to approve the rent increase.



**The Primary Care Commissioning Committee:**

Noted the above and approved the rent increase of £8,432 per annum for Lawrence House.

**7.0 Finance and Performance**

**7.2 Integrated Quality Performance Report**

Andrew Dangerfield presented the report and noted the following:

- Friends and Family suspended nationally
- 1 practice received a CQC inspection of 'requires improvement' – CCG working with the practice
- Increase in primary care appointments at 34.2%
- Face to face appointments increased by 42.5%
- Increase in additional roles for workforce
- Health checks was an accumulative target (not 100%)

Andrew gave assurance that patients were safe at the practice which received 'requires improvement' and Sue Peckitt noted that she regularly went into the practice to give support. Lots of improvements had been made and the practice were looking forward to the next CQC report.

**The Primary Care Commissioning Committee:**

Noted the Integrated Quality Performance Report and updates.

**8.0 Investment Decisions**

There were no investment decisions to approve.

**The Primary Care Commissioning Committee:**

Noted that there were no investment decisions to approve.

**9.0 Minutes and Key Messages to the Governing Body**

Sheenagh Powell noted the pressures in the system and the management of risks and noted that minutes and key messages would follow.

**The Primary Care Commissioning Committee:**

Noted the highlights of the minutes and that minutes and key messages to the Governing Body would follow.

**10. Any Other Business**

There was no other business to discuss.

**The Primary Care Commissioning Committee:**

Noted that there was no other business to discuss.

## **11. Meeting Reflection**

Sheenagh Powell thanked all for their contributions.

### **The Primary Care Commissioning Committee:**

Noted the above.

## **12. Next Meeting**

The Chair noted the next meeting would take place on Thursday 27 January 2022.

### **The Primary Care Commissioning Committee:**

Noted the date of the next meeting.

The meeting closed at 15:28.

## **Follow up actions**

The actions required as detailed in these minutes are attached at Appendix A.

## **Primary Care Commissioning Committee**

### **Key Messages to the Governing Body**

- the Committee was assured by the Risk Report which stated there were no risks rated 15 and above. Two risks are rated 12 and actions were outlined to manage these risks. They remain centred around pressure in Primary care.
- the Committee received the annual mandated internal audit report on Primary Care Commissioning. The committee were pleased to note that the audit provided substantial assurance on commissioning and procurement of Primary Care Medical Services. Thanks to all staff involved was stated by several members of the committee.
- the Primary Care report provided an update to the committee on COVID recovery, the vaccination programme and GP digital work streams. There was emphasis on the pressure that practices are currently under and staffing issues. Initiatives which are being implemented around sharing and supplementing staff across the region were discussed. In addition, the national allocation of £250m to primary care to boost services before the winter was outlined. More information on this will be provided at the next meeting.
- NHS England provided a report including national initiatives regarding weight management and long COVID services and also an update on the timetable to move the commissioning of Primary Care services including dental, pharmacy and optometry services to ICS level after April 2022.
- Public Health provided an update on COVID prevention, commissioned PH services in Primary Care and the Warm and Well - Cold Homes scheme.
- the Committee approved a backdated rent review for Central Healthcare Lawrence House.
- the Committee received the Finance Report. It was reported there were financial pressures in both Primary Care and prescribing which were showing forecast overspends. £931k and £714k respectively. It was re-emphasised that the CCG is underfunded for Primary Care services by £2.3m per year. Slippage in appointments was offsetting some of the overspend at this time but plans to recruit could erode this offsetting underspend.
- the very informative Performance Report was provided. It highlighted the very significant 34.2% increase in GP appointments compared to last year. This is higher than the national average. It reported significant increase in Secondary Care activity too as efforts are made to reduce the backlog and deal with an increase in A&E attendances of 22%.

**Item 4.2 Appendix A**

**North Yorkshire Clinical Commissioning Group  
Actions from the Primary Care Commissioning Committee on 21 October 2021**

Meeting Date	Item	Action	Responsibility	Action Completed / Due to be Completed (as applicable)
27 May 2021	7.1 Internal Audit Report	LES Report to be brought to a future committee.  22.07.21 – Andrew Dangerfield confirmed that the report was not ready but will be presented to the next meeting.	AD / JH	27 January 2022

**North Yorkshire Clinical Commissioning Group  
Closed actions from the Primary Care Commissioning Committee**

Meeting Date	Item	Action	Responsibility	Action Completed / Due to be Completed (as applicable)
27 May 2021	5.3 PCCC Forward Plan	<p>Lisa Pope to check if the schedule should be included in the forward plan.</p> <p>11.06.21 – Lisa confirmed the schedule does not need to be included in the forward plan.</p> <p>22.07.21 – It was agreed that 'Schedule' above should read 'Primary Care Strategy' and that an update on Primary Care Planning and HCV ICS Primary Care Development to be presented to the next meeting.</p>	WB	<b>Complete</b>
21 October 2021	6.3 Public Health Update	Andrew Dangerfield and Angela Hall to have a conversation regarding Living Well Smokefree.	AD / AH	<b>Complete</b>
21 October 2021	6.3 Public Health Update	Andrew Dangerfield, Bruce Willoughby, Angela Hall and Natalie Smith to have a discussion regarding extension of the Public Health commissioned APL services from March 2022.	AD / BW / AH / NS	<b>Complete</b>